Services	BadgerCare Plus Standard Plan	BadgerCare Plus Benchmark Plan
Drugs	Same coverage as current Wisconsin Medicaid. Comprehensive drug benefit with	Generic-only formulary drugs with a few generic over-the-counter drugs with a \$5.00 copayment per item.
Update 2007-108	coverage of generic prescription drugs, brand prescription drugs and some over-the- counter (OTC) drugs.	Brand-name drugs are only available through the Badger Rx plan, which provides a discount on the cost.
	Copayments: \$0.50 for OTC Drugs \$1.00 for Generic Drugs \$3.00 for Prescription Drugs	If applicable, diagnosis code restrictions and prior authorization apply.
	No change in policy, procedures, or prior authorization requirements.	
Physician, Anesthesia,	Same coverage as current Wisconsin	Same coverage as Wisconsin Medicaid with a \$15.00 copayment per visit.
X-Ray, Laboratory	Medicaid.	
Update 2007-99	No change in copayment.	If applicable, prior authorization applies.
	No change in policy, procedures, or prior authorization requirements.	
Prenatal Care/Maternity	Same coverage as current Wisconsin	Same coverage as Wisconsin Medicaid including Prenatal Care Coordination for high-risk
Update 2007-84	Medicaid and prenatal care coordination for high risk pregnancies. Coverage of mental health and substance abuse screening, preventive mental health counseling, and	pregnancies. Coverage of mental health and substance abuse screening, preventive mental health counseling and substance abuse intervention services for pregnant women at risk of mental health or substance abuse problems.
	substance abuse intervention services for pregnant women at risk of mental health or substance abuse problems.	No prior authorization.
	No change in policy, procedures, or prior authorization requirements.	
Inpatient Hospital	Same coverage as current Wisconsin Medicaid with a \$3 copayment per day, but	Same coverage as Wisconsin Medicaid with a \$100.00 copayment per hospital stay (medical surgery) and a \$50.00 copayment per stay for mental health or substance abuse hospital.
Update 2007-107	capped at a total of \$75 per stay.	No prior authorization.
	No change in policy, procedures, or prior authorization requirements.	

Services	BadgerCare Plus Standard Plan	BadgerCare Plus Benchmark Plan
Outpatient Hospital	Same coverage as current Wisconsin Medicaid with a \$3 copayment per visit.	Same coverage as Wisconsin Medicaid with a \$15.00 copayment per visit (although multiple visits to the same provider on the same day will be treated as a single visit).
Update 2007-107	No change in policy, procedures, or prior authorization requirements.	If applicable, prior authorization applies.
Emergency Room (ER)	Same coverage as current Wisconsin Medicaid with a \$3 copayment per visit	Same coverage as Wisconsin Medicaid with a \$60.00 copayment for non-emergent use of the emergency room.
Update 2007-107	No change in policy, procedures, or prior authorization requirements.	"Non-emergent use" is defined as no immediate admission to the hospital.
		No prior authorization.
Nursing Home	Same coverage as current Wisconsin Medicaid.	Same coverage as Wisconsin Medicaid for stays at skilled nursing homes with a limit of 30 days per enrollment year.
Update 2007-96	No change in policy, procedures, or prior authorization requirements.	Exceptional DME supplied in nursing home is subject to prior authorization.
		Bedhold is not covered.
		Limited benefits: DMS including exceptional supplies.
		DME including exceptional supplies. Therapies (i.e. OT, PT, SLP)
		Patient liability will not be applied
		No prior authorization.
Physical Therapy (PT), Occupational Therapy (OT) and Speech Therapy (ST)	Same coverage as current Wisconsin Medicaid with a \$1 copayment for each procedure). Prior authorization is required after 35 visits per therapy discipline.	20 visits per therapy discipline per enrollment year. For cardiac rehabilitation, the number of visits is increased to 36 PT visits. Not part of the 20 visits per discipline.
Update 2007-102	No change in policy, procedures, or prior	There is a \$15.00 copayment per visit.
Spanie 2007 102	authorization requirements.	No prior authorization.

Services	BadgerCare Plus Standard Plan	BadgerCare Plus Benchmark Plan
Durable Medical	Same coverage as current Wisconsin	Same coverage as Wisconsin Medicaid with a \$5.00 copayment per item. Reimbursement is
Equipment (DME)	Medicaid with a sliding copayment amount	limited to \$2,500.00 of paid amount in an enrollment year.
	(\$0.50 to \$3.00 per item) based upon the	
Update 2007-103	cost of the item.	Prior authorization applies.
	No change in policy, procedures, or prior authorization requirements.	
Disposable Medical	Same coverage as current Wisconsin	Coverage is limited to syringes, diabetic pens, and DMS that are required with the use of a
Supplies (DMS)	Medicaid with a copayment of \$0.50 per item.	DME item. There is a \$0.50 copayment for syringes and diabetic pens.
Update 2007-89		
	No change in policy, procedures, or prior authorization requirements.	
Mental Health and	Same coverage as current Wisconsin	Covered services include outpatient mental health, outpatient substance abuse (including
Substance Abuse	Medicaid (not including room and board)	narcotic treatment), mental health day treatment for adults, substance abuse day treatment, and
Treatment	with a \$1 copayment per visit if applicable.	child/adolescent mental health day treatment.
Update 2007-??	No change in policy, procedures, or prior authorization requirements.	Services not covered include crisis intervention, community support program (CSP), comprehensive community services (CCS), outpatient mental health and substance abuse services in the home and community for adults, and substance abuse residential treatment.
		Copayments:
		• Inpatient hospital: \$50.00 per visit.
		Day treatment: \$10.00 per day.
		Narcotic treatment: \$15.00 per visit—lab tests do not require a copayment.
		Outpatient substance abuse: \$15.00 per visit.
		Substance abuse services will have a \$7,000.00 limit, consisting of the following:
		• \$1,800.00 outpatient treatment.
		• \$2,700.00 transitional services.
		• \$6,300.00 general acute care.
		• \$7,000.00 Institute of Mental Health.
		There is a 30-day limit for inpatient hospital for both mental health and substance abuse.

Services	BadgerCare Plus Standard Plan	BadgerCare Plus Benchmark Plan
Home Health	Same coverage as current Wisconsin	Coverage of in-home skilled nursing services, home health aide services, and therapies (PT,
	Medicaid of private duty nursing, home	OT, SLP) with a copayment of \$15.00 per visit. Coverage is limited to 60 visits per enrollment
Update 2007-92	health care, personal care without a	year.
	copayment.	
		Prior authorization applies to all home health services provided by nurses working
	No change in policy, procedures, or prior	independent of a home health agency.
	authorization requirements.	
		Prior authorization needed for 31 – 60 visits.
Transportation	Same coverage as current Wisconsin	Full coverage of emergency transportation only with a \$50.00 copayment per trip.
II 1 . 2007 02 (CM)	Medicaid of emergency and non-emergency	
Update 2007-82 (SMV)	transportation to and from a Medicaid	Non-emergency transportation is not covered.
Update 2007-87	certified provider for a Medicaid covered	Duion south suimetion, do so not smaller
(Ambulance Services)	service with a \$1 copayment per round trip.	Prior authorization does not apply.
	No change in policy, procedures, or prior	
	authorization requirements.	
HealthCheck	Same coverage as current Wisconsin	Same coverage as Wisconsin Medicaid of HealthCheck for individuals under 21 years old.
Update 2007-81	Medicaid of HealthCheck screenings and	Same coverage as wisconsin incurcate of meaninemeer for marviagas under 21 years old.
Opunic 2007 01	other service for individuals under age 21	HealthCheck "Other Services" are not covered unless coverage is specified elsewhere.
	years.	Treatmented Carlet Services are not covered amoss coverage is specified elsewhere.
	J 5.11.21	Prior authorization does not apply.
	No change in policy, procedures, or prior	The state of the s
	authorization requirements.	
Dental	Same coverage as current Wisconsin	50 percent allowable charges as defined by Department of Health and Family Services for
	Medicaid of preventive, restorative, and	preventive, diagnostic, simple restorative, periodontics, and surgical extractions for both
Update 2007-109	palliative services with a \$1 to \$3	pregnant women and children. Deductibles are not applied to preventive and diagnostic
	copayment (varies by service provided).	services.
	No change in policy, procedures, or prior	\$200.00 per enrollment year deductible.
	authorization requirements.	\$750.00 per enrollment year maximum.
		Coverage is for pregnant women and children only.
		No consument
		No copayment.
		Prior authorization applies for select services.

Services	BadgerCare Plus Standard Plan	BadgerCare Plus Benchmark Plan
Vision	Same coverage as current Wisconsin	Coverage of one eye exam every two years with a \$15.00 copayment per visit.
Hadata 2007 104	Medicaid including eye glass benefit with a	Final area and contact languages are not accounted
Update 2007-104	\$1 to \$3 copayment (varies by service provided).	Eyeglasses and contact lenses are not covered.
	provided).	Prior authorization does not apply.
	No change in policy, procedures, or	The state of the s
	prior authorization requirements.	
Smoking Cessation	Same coverage as current Wisconsin	New expanded coverage of over-the-counter tobacco cessation gum products for all
Services	Medicaid. Effective Feb. 1, 2008, over-the-counter (OTC) tobacco cessation is covered	BadgerCare Plus members.
Update 2007-??	for members.	Smoking cessation counseling counts toward the mental health and substance abuse treatment
Opunic 2007 ::	for members.	dollar limit.
		Prior authorization does not apply.
Hospice	Same coverage as current Wisconsin Medicaid.	Same coverage as Wisconsin Medicaid with a \$2.00 copayment per day and limited to 360
Update 2007-106	Medicaid.	days lifetime.
Opuate 2007-100	No change in policy, procedures, or prior	Prior authorization does not apply.
	authorization requirements.	umanomoor door soon appropri
Reproductive Health	Same coverage as current Wisconsin	Same coverage as Wisconsin Medicaid.
T. 1 . 2005 02	Medicaid, excluding infertility treatments,	
Update 2007-83	surrogate parenting, and the reversal of voluntary sterilization. Birth control pills	Family planning services are available without a copayment.
	are available without a copayment.	Prior authorization does not apply.
	are available without a coparition.	The wanterman account apply.
	No change in policy, procedures, or prior	
G1:	authorization requirements.	
Chiropractic Services	Same coverage as current Wisconsin Medicaid with a \$1 to \$3 copayment per	Same coverage as Wisconsin Medicaid with a \$15.00 copayment per visit.
Update 2007-90	visit (varies by service provided).	Prior authorization applies.
Podiatric Services	Same coverage as current Wisconsin	Same coverage as Wisconsin Medicaid with a \$15.00 copayment per visit.
	Medicaid with a \$1 to \$3 copayment per	
Update 2007-97	visit (varies by service provided).	Prior authorization does not apply.
	No shance in malicular annotadores commission	
	No change in policy, procedures, or prior authorization requirements.	
Hearing Services	Same coverage as current Wisconsin	The cost of hearing instruments and related services are not covered. There is a \$15.00
	Medicaid.	copayment per visit for procedure code 69210, "Removal impacted cerumen (separate
Update 2007-101		procedure), one or both ears."
		Drive with significant to sent another
		Prior authorization does not apply.